FEE TRANSMITTAL						Complete if Known						74)
for FY 2004					Application Number			nber				8. 89
					Filing Date							2.€
Effectiv	re 10/01/2004. Pa	atent fees are subje	act to annual rev	rision.		First Nam	ed Inv	entor	Kev	in Embree		82
Applicat	nt claims sma	all entity status	See 37 C	FR 1.27.		Examiner	Name	,				31
	Tit Gainis Sine	- Chary States				Art Unit					195	
TOTAL A	MOUNT OF	PAYMENT	(\$)	932	.00	Attorney Docket No. 3801P127					<del></del>	
METHO	OF PAYM	IENT (check	all that ap	ply)				FEI	E CALCULAT	ION (continue	ed)	
			3.	3. ADDITIONAL FEES								
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None				l								
Deposit Account						rge Entity		I Entity	-			
Deposit	<u></u>			<del></del> -	Fee Cod		Fee Code	Fee (\$)	Fe	e Description		Fee Paid
Account		02-2666			405		2051			•		
Number					1051 1052		2051 2052	65 25	Surcharge - late filing Surcharge - late pro-	•		<u> </u>
Deposit Account D	lakalu Sak	oloff, Taylor	. & Zafma	nIID					cover sheet.			
Name D	iakciy, sok	Ololi, Taylor	C Zaiiila	II LLI	2053		2053	130	Non-English specific	•		
The Commissione	r is authorized to	o: ( check all that a	pply)		1812	2 2,520	1812	2,520	For filing a request for ex parte reexamination			
Charge fee(s)	indicated below	<b>⊠</b> Cre	dit any overpay	ments	1804	4 920*	1804	920 °	Requesting publication of SIR prior to Examiner action			
		underpayment of fer	es as required u	inder 37 CFR	4000	E 4.040*	4005	4 040 *		es of CID offer		
99 1.10, 1.17,		except for the filing	n foo		1805	5 1,840*	1805	1,840	Requesting publicati Examiner action	on or six aiter		
	entified deposit a		,		1251	1 110	2251	55	Extension for reply w	ithin first month		
	FFF CA	ALCULATIO	N		1252		2252	210	Extension for reply w	ithin second month		
1. BASIC	FILING FE				1253		2253		Extension for reply w	ithin third month		
Large Entity	Small Entity				1254		2254		Extension for reply w			
Fee Fee	Fee Fee	Fee Description		Fee Paid	1255	_	2255		Extension for reply w			
Code (\$)	Code (\$)			700.00		.,		000		Tall that the ter		
1001 770	2001 385	Utility filing fee		770.00	1404		2401	165	Notice of Appeal	- 4 - 6 1		LI
1002 、 340	2002 170	Design filing fee	1		1402		2402	165	Filing a brief in supp	•		
1003 530	2003 265	Plant filing fee			1403		2403	145	Request for oral hea	-		
1004 770	2004 385	Reissue filing fe	e		1451		2451	1,510	Petition to institute a	public use proceedi	ng	
1005 . 160	2005 80	Provisional filing	fee		1452	2 110	2452	55	Petition to revive - u	navoidable		
	SUB	TOTAL (1)	(\$)	770.00	1453	3 1,330	2453	665	Petition to revive - un	nintentional		
1501 1,330 2501 665 Utility issue fee (or reissue)												
2. EXTRA	A CLAIM FE	EES <sub>Extra</sub>	Fee from		1502		2502	240	Design issue fee			
Total Claims		Claims	below	Fee Paid	1503	• • •	2503	320	Plant issue fee			
Independent	22 _ 20"	= 2 X	18.00	\$36.00	1460	D 130	2460	130	Petitions to the Com	missioner		
Claims	_4 3*	- 1 ×	86.00 =	\$86.00	1807	7 50	1807	50	Prosessing fee unde	r 37 CFR 1.17(q)		
Multiple Dependent		I	=		1806	3 180	1806	180	Submission of Inform	nation Disclosure Str	mt	
Large Entity	Small Entity	_			8021	1 40	8021	40	Recording each pate			40.00
Fee Fee	Fee Fee	Fee Description							property (times num!			
Code (\$)	Code (\$)				1809	770	1809		Filing a submission a (37 CFR § 1.129(a))	fter final rejection		
1202 18	2202 9	Claims in excess of	-		1810	770	2810		For each additional is	avention to be		LI
1201 86	2201 43	Independent claim			1010	, ,,,	2010		examined (37 CFR §			
1203 290	2203 145	Multiple Depender	•		1801	1 770	2801	385	Request for Continue	ed Examination (RCE	≣)	
1204 86	2204 43	**Reissue indeper patent	ident claims ove	er onginai	1802	2 900	1802	900	Request for expedite	d examination		
1205 18	2205 9	**Reissue claims i	n excess of 20 a	and over				of a design application				
	,	original patent			Other	fee (specify)						
	SUB	TOTAL (2)	(\$)	122.00				-				
**or num		2.2			*Reduc	ed by Basic Filing	Fee Paid			SUBTOTAL (3)	(\$)	40.00
**or number previously paid, if greater, For Reissues, see below												
SUBMITTED BY					- 1	Dogistrotic	n No	<del></del>			lete (if applica	_
Name (Print/Tv	ne) Mark	R Vatuone		)	- 1'	Registratio	ni IVO.	5	3 710	Telephone	(408) 947	7-8200 l

Date

Mark

Signature



## UTILITY PATENT APPLICATION **TRANSMITTAL**

Attomey Docket No.			3801P127				
First li	nventor	Kevin	Embree				
Title	METHOD AND SYSTEM TO DETECT OUTLYING BEHAVIOR IN A NETWORK-BASED MARKETPLACE						
Current Mail Label Ma		h = 1 A1=	DY 140000 GO 1 GY 10				

Date 4/12/64

(Only for new nonprovisional applications under 37 CFR 1.53(	Express Ma	il Label No.	EV43933791	7US						
APPLICATION ELEMEN See MPEP chapter 600 concerning utility patent ap	ADI	Mail Stop Patent Application  ADDRESS TO: Commissioner for Patents P.O. Box 1450  Alexandria, VA 22313-1450								
Fee Transmittal Form (e.g., PTO/SB/17 (Submit an original and a duplicate for fee processing)			D-ROM or CD-R in do		or					
Applicant claims small entity status.     See 37 CFR 1.27.		Nucleotide and/or Amino Acid Sequence Submission     (if applicable, all necessary)								
(preferred arrangement set forth below)  - Descriptive title of the Invention  - Cross References to Related Application  - Statement Regarding Fed sponsored Foundation  - Reference to sequence listing, a table, or a computer program listing appendix	ons R & D	<ul> <li>a.</li></ul>								
<ul> <li>Background of the Invention</li> <li>Brief Summary of the Invention</li> </ul>					•					
Brief Description of the Drawings (if file     Detailed Description     Claim(s)     Abstract of the Disclosure	d)	9. Assignment Papers (cover sheet & document(s)) 10. 37 C.F.R. § 3.73(b) Statement Power of Attor (when there is an assignee) 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS								
4. Drawing(s) (35 U.S.C. 113) [Total Shi	eets <u>10</u> ]		Statement (IDS)/PTO-1	449	Citations					
5. Oath or Declaration (signed)	13.	3. ☐ Preliminary Amendment ☐ Application Am. 4. ☑ Return Receipt Postcard (MPEP 503) to Reflect Claim Priority  5. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)  6. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.  7. ☐ Other:    Ply the requisite information below and in the first sentence of the 7 CFR 1.76:   CIP)   Of prior application No:   Group/Art Unit:   CIP    CI								
	19. CORRESP	ONDENCE	ADDRESS							
☑ .Customer Number	08791		or	<b>⊠</b> Correspor	ndence address below					
Name Mark R. Vatuone										
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City Los Angeles	S	tate (	California	Zip Code	90025					
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Name (Print/Type) Mark R. Vatuone			Registration No	. (Attorney/Agent)	53.719					

Signature

MacL K. Maluran

Based on PTO/SB/05 (01-04) as modified by Blakely, Sclokoff, Taylor & Zafman (wtr) 02/10/2004.

SEND TO: Mall Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Signature